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SECURITIES AND EXCHANGE COMMISSIZE

OMB APPROVA

ISSION

OMB Number

3235-0123

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ANNUAL AUDITED REPORT OF REGISTRATIONS
FORM X-17A-5 8 EXAMINATIONS

Washington, D.C. 20549

PART III

SEC FILE NUMBER 8- 22338

FACING PAGE

Information Required of Brokers and Dealers Pursuant to Section 17 of the Securities Exchange Act of 1934 and Rule 17a-5 Thereunder

	AND ENDING_ ^{12/}	31/05			
MM/DD/YY		MM/DD/YY			
ISTRANT IDENTIFI	CATION				
NAME OF BROKER-DEALER: CFC EQUITIES, LLC					
ADDRESS OF PRINCIPAL PLACE OF BUSINESS: (Do not use P.O. Box No.)					
(No. and Street)					
NY	11360				
(State)	(Zip Code)			
RSON TO CONTACT IN I					
		(Arca Code - Telephone Numbe			
DUNTANT IDENTIFI	CATION				
oose opinion is contained i	n this Report*				
Name ~ if individual, state last, j	irsi, middle name)				
New York	NY	10036			
(City)	(State)	(Zip Code)			
	PROCESS	SED			
	\\ \ Align 2 20	nc			
	\V -3 - 3	J0			
d States or any of its posse	essions. FINANCIAL				
OR OFFICIAL USE O					
	J				
	ISTRANT IDENTIFICATION ITIES, LLC NESS: (Do not use P.O. B (No. and Street) NY (State) RSON TO CONTACT IN F DUNTANT IDENTIFI Pose opinion is contained in Name ~ if individual, state last, f New York (City)	ISTRANT IDENTIFICATION ITIES, LLC NESS: (Do not use P.O. Box No.) (No. and Street) NY 11360 (State) (RSON TO CONTACT IN REGARD TO THIS REI 718-22! DUNTANT IDENTIFICATION Procession of individual, state laxt, first, middle name) New York (City) (State) PROCESS AUG 0 2 20 THOMSON FINANCIAL FOR OFFICIAL USE ONLY			

*Claims for exemption from the requirement that the annual report be covered by the opinion of an independent public accountant must be supported by a statement of facts and circumstances relied on as the basis for the exemption. See Section 240.17a-5(e)(2)

SEC 1410 (06-02)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

MAR 1 7 2006

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0123
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hours per response.....12.00

Form X-17A-5

FOCUS REPORT

(Financial and Operational Combined Uniform Single Report)

PART IIA 12

			(Ple	ase re	ad instruction:	s before pi	reparing Form.)		
	16		2) Rule 17		17		3) Rule 17a-11 5) Other 26		
NAME OF BROKER-DEALER		, , , , , , , , , , , , , , , , , , , ,					SEC FILE NO. 8-22338		14
CFC Equities, LLC						13	FIRM I.D. NO. 11-3579179		
ADDRESS OF PRINCIPAL PLACE 2 Bay Club Drive, A		S (Do Not Use)	P.O. Box No.	.)		20	FOR PERIOD BEGIN		-
Bayside	(No.		22	113		23	AND ENDING (MM/ 12/31/05	DD/YY)	24
NAME AND TELEPHONE NUMBE	R OF PERS	(State) ON TO CONTAC	CT IN REGA	RD TO	(Zip Code) THIS REPORT		(Area Code) — Te	elephone No.	25
Neil Sumner NAME(S) OF SUBSIDIARIES OR	AFFILIATES	CONSOLIDATE	D IN THIS I	REPORT	<u> </u>	30	212-938-19 OFFICIAL		31
						32			33 35
						36			37
	1	CHECK HERE II EXECUTION: The registra whom it is e complete. It integral par unamended submitted. Dated the _Manual sign 1) Principal 2) Principal 3) Principal ATTENTION	ent/broker of executed ret is understand this items, statematures of this executive of the	or deale present tood the Form a tements Officer of Officer on all missing the properties of the prope	thereby that all in at all required itend that the substands schedules do not managing Partier Partner	ACCOUNTS OREPORT Form and information of the statem mission of the statem mission of the statem mission of the statem missions of the statem mission mi	ts attachments and contained therein is ents, and schedule any amendment recorrect and comp	s true, corrected as are considered as previous 20 %	x 41 42 (s) by ct and dered

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SEC 1696 (02-03) 1 of 16

OATH OR AFFIRMATION

Samuel Weiss	, swear (or affirm) that, to the best of
knowledge and belief the accompanying financial statements FC EQUITIES, LLC	
December 31 , 20 (, are true and correct. I further swear (or affirm) tha
ther the company nor any partner, proprietor, principal of	ficer or director has any proprietary interest in any account
ssified solely as that of a customer, except as follows:	
3	
.]	
υ 	
, У	Samuel Keese
	Signature
	Member
	Title
///	
Notary Public	SILVANA WOOD
is report ** contains (check all applicable boxes):	Notary Public, State of New York No. 41-4993884
(a) Facing Page.	Qualified in Queens County Commission Expires March 23, 20 10
(b) Statement of Financial Condition.	Commission Expires March 23, 20 10
(c) Statement of Income (Loss).	
(d) Statement of Changes in Financial Condition. Cash	Flows
(e) Statement of Changes in Stockholders' Equity or Par	rtners' or Sole Proprietors' Capital.
(f) Statement of Changes in Liabilities Subordinated to	
(g) Computation of Net Capital.	
(h) Computation for Determination of Reserve Requirem	
(i) Information Relating to the Possession or Control Re	
	of the Computation of Net Capital Under Rule 15c3-3 and t
Computation for Determination of the Reserve Requ	
(k) A Reconciliation between the audited and unaudited consolidation.	Statements of Financial Condition with respect to methods
(I) An Oath or Affirmation.	
(m) A copy of the SIPC Supplemental Report.	
	exist or found to have existed since the date of the previous at

^{**}For conditions of confidential treatment of certain portions of this filing, see section 240.17a-5(e)(3).